PART B - FEE(S) TRANSMITTAL

omplete and send this form, together with applicable fee(s), to: Mail

1370.00 OP

6.00 OP

01 FC:1501

02 FC:8001

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(Signature)

or Fax (703) 746-4000

INSTRUCTIONS GIBES form should be used for transmitting the ISSUE FEE and PUB appropriate. All further correspondence including the Patent, advance orders and notificati indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new maintenance fee notifications.	ion of maintenance fees will be mailed to the current correspondence address as
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 45305 7590 11/24/2004	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.
RENNER, OTTO, BOISSELLE & SKLAR, LLP (AMDS) 1621 EUCLID AVE - 19TH FLOOR CLEVELAND, OH 44115-2191 12/07/2004 WASFAW2 00000098 09644464	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

TITLE OF INVENTION: NETWORK TRANSMITTER WITH DATA FRAME PRIORITY MANAGEMENT FOR DATA TRANSMISSION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$0	\$1370	02/24/2005
EXAM	MINER	ART UNIT	CLASS-SUBCLASS	7	
ZHONO	G, CHAD	2152	709-250000	_	
R 1.363). Change of correspondedess form PTO/SB/1 "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME ANI	the address or indication of "ladence address (or Change or 22) attached. Ition (or "Fee Address" Indicor more recent) attached. U Description of the address of the addr	f Correspondence of Correspond	For printing on the patent front page, 1) the names of up to 3 registered pater agents OR, alternatively, 2) the name of a single firm (having asegistered attorney or agent) and the na registered patent attorneys or agents. sted, no name will be printed. PATENT (print or type) will appear on the patent. If an assignment.	s a member a 2 mes of up to If no name is 3	c, Otto, Boisse Sklar, LLP
Advanced Mic	ero Devices, In	ıc. S	ESIDENCE: (CITY and STATE OR CO	,	
Advanced Mic	ero Devices, In	ories (will not be printed	Sunnyvale, CA	,	roup entity 🗖 Government
Advanced Mic	ero Devices, In	ories (will not be printed	Sunnyvale, CA I on the patent): Individual	Corporation or other private gr	roup entity
Advanced Mic ase check the appropriate The following fee(s) are Sissue Fee	e assignee category or category category enclosed:	ories (will not be printed	Sunnyvale, CA	Corporation or other private grenclosed.	roup entity Governmen
Advanced Mic ase check the appropriate The following fee(s) are Klssue Fee Publication Fee (No.	e assignee category or category enclosed:	ories (will not be printed 4b. Pa kted)	d on the patent): Individual ryment of Fee(s): A check in the amount of the fee(s) is a Payment by credit card. Form PTO-20	Corporation or other private greenclosed. 38 is attached.	
ease check the appropriate The following fee(s) are Signature Fee Publication Fee (No signature) RAdvance Order - # o	e assignee category or category enclosed:	ories (will not be printed 4b. Pa 4b. Pa 4cted) Dep	d on the patent): Individual remains of Fee(s): A check in the amount of the fee(s) is	Corporation or other private grenclosed. 38 is attached. charge the required fee(s), or 8 (enclose an extra or	credit any overpayment, to copy of this form).
Advanced Microsectors of the following fee(s) are Solution Fee (No. 1) Publication Fee (No. 2) Exadvance Order - # o	e assignee category or category enclosed: small entity discount permit of Copies 2 (from status indicated above MALL ENTITY status. See	ories (will not be printed 4b. Pa (ted) Deplement	d on the patent): Individual ryment of Fee(s): A check in the amount of the fee(s) is Payment by credit card. Form PTO-20 The Director is hereby authorized by posit Account Number 18-098	Corporation or other private grenclosed. 38 is attached. charge the required fee(s), or 8 (enclose an extra of the charge the required fee(s).	credit any overpayment, to copy of this form). CFR 1.27(g)(2).
Advanced Micase check the appropriate The following fee(s) are Sissue Fee Publication Fee (Nos Kadvance Order - # o Change in Entity Status	e assignee category or category enclosed: small entity discount permit of Copies 2 (from status indicated above MALL ENTITY status. See	ories (will not be printed 4b. Pa (ted) Deplement	Sunnyvale, CA I on the patent): Individual Tyment of Fee(s): A check in the amount of the fee(s) is Payment by credit card. Form PTO-20 The Director is hereby authorized by posit Account Number 18-098 b. Applicant is no longer claiming SM Fee (if any) or to re-apply any previous manyone other than the applicant; a rece.	Corporation or other private grenclosed. 38 is attached. charge the required fee(s), or 8 (enclose an extra of the charge the required fee(s).	credit any overpayment, to copy of this form). CFR 1.27(g)(2). ation identified above, the assignee or other party in

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.